

09/831483

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>be</i>	45	5/29
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>pk</i>		6/4/01

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ..... Canceled  
 + ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
Final	
Original	
1	7/27/01
2	5/12/03
3	
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5	
6	
7	
8	
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10	
11	✓
12	0 =
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	✓
21	✓
22	0
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	0 =
30	✓
31	✓
32	✓
33	✓
34	0 =
35	0 =
36	✓
37	✓
38	✓
39	0
40	✓
41	0
42	0
43	✓
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Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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